

IAP20 RECEIVED 17 NOV 2005

Application Data Sheet**Application Information**

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|-------------------------------------|--|
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | METHOD FOR THE PREPARATION OF TRANSGENIC PLANTS CHARACTERISED BY GEMINIVIRUS LASTING RESISTANCE |
| Attorney Docket Number:: | 2520-1068 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 16 |
| Small Entity?:: | Yes |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: MARIO
Middle Name::
Family Name:: TAVAZZA
Name Suffix::
City of Residence:: ROME
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing C/O ENEA
Address:: LUNGOTEVERE G.A. THAON DI REVEL, 76
City of Mailing Address:: ROME
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00196

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: RAFFAELA
Middle Name::
Family Name:: TAVAZZA
Name Suffix::
City of Residence:: ROME
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing C/O ENEA
Address:: LUNGOTEVERE G.A. THAON DI REVEL, 76
City of Mailing Address:: ROME

State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00196

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALESSANDRA
Middle Name::
Family Name:: LUCIOLI
Name Suffix::
City of Residence:: ROME
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing C/O ENEA
Address:: LUNGOTEVERE GLA. THAON DI REVEL, 76
City of Mailing Address:: ROME
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00196

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ANGELA
Middle Name::
Family Name:: BRUNETTI
Name Suffix::
City of Residence:: ROME
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing C/O ENEA

Address:: LUNGOTEVERE G.A. THAON DI REVEL, 76
City of Mailing Address:: ROME
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00196

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALESSANDRA
Middle Name::
Family Name:: BERARDI
Name Suffix::

City of Residence:: ROME
State or Province of
Residence::

Country of Residence:: ITALY

Street of Mailing C/O ENEA

Address:: LUNGOTEVERE G.A. THAON DI REVEL, 76
City of Mailing Address:: ROME
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00196

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: EMANUELA
Middle Name::
Family Name:: NORIS
Name Suffix::

City of Residence:: ROME
State or Province of
Residence::

Country of Residence:: ITALY
Street of Mailing C/O COSIGLIO NAZIONALE DELLE RICERCHE
Address:: P.LE ALDO MORO, 7
City of Mailing Address:: ROME
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00185

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GIAN
Middle Name:: PAOLO
Family Name:: ACCOTTO
Name Suffix::

City of Residence:: ROME
State or Province of
Residence::

Country of Residence:: ITALY
Street of Mailing C/O CONSIGLIO NAZIONALE DELLE
Address:: RICERCHE
P.LE ALDO MORO, 7

City of Mailing Address:: ROME
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 00185

Correspondence Information

Correspondence Customer 00466
Number::

Representative Information

| | |
|-------------------------|-------|
| Representative Customer | 00466 |
| Number:: | |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|----------------------|-------------------------|-------------------------|
| This application | National Stage of | PCT/IT2004/000287 | 5/19/04 |
| | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|-------------------------|---------------|-----------------------|
| ITALY | RM2003A000242 | 5/19/03 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::